

# CLAIMS ONLY

Application Number

10/613,372

Filing Date

Applicant(s)

BEST AVAILABLE COPY

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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Total indep	3					
Total depend	30					
Total claims	33					

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total indep			3		4	
Total Depend			33		36	
Total Claims			36		40	